

FLORIDA TRAFFIC CRASH REPORT
LONG FORMMAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH
RECORDS, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0537

DO NOT WRITE IN THIS SPACE

Time & Location		DATE OF CRASH		TIME OF CRASH		TIME OFFICER NOTIFIED		TIME OFFICER ARRIVED		INVEST AGENCY REPORT NUMBER		HSMV CRASH REPORT NUMBER	
		09/04/02		8:19 AM		8:41 AM		8:29 AM		02-39-13353-09		71147966	
		COUNTY / CITY CODE		FEET or MILE(S)		N S E W		CITY OR TOWN		(Check if in City or Town)		COUNTY	
		09-00		7		X		Pensacola				Escambia	
		AT NODE NO.		FEET or MILE(S)		FROM NODE NO.		NEXT NODE NO.		NO. OF LANES		1. DIVIDED 2. UNDIVIDED	
										2		U.S. A1E 90 (S.R. 10)	
		AT THE INTERSECTION OF (street, road or highway)		FEET or MILE(S)		N S E W		FROM INTERSECTION OF (street, road or highway)					
				1000		X		Pine Forest Road (Pine Forest Road)					
		DRIVER ACTION		YEAR		MAKE		TYPE		USE		VEH. LICENSE NUMBER	
		3		01		MERC		01		01		HD796T	
		TRAILER OR TOWED VEHICLE INFORMATION										STATE	
												FL	
												VEHICLE IDENTIFICATION NUMBER	
												1MEFM53 UHAG05357	
												18. Undercarriage 19. Overturn 20. Windshield 21. Trailer	
												SHOW FIRST POINT OF VEHICLE DAMAGE AND CIRCLE DAMAGED AREA(S)	
												1	
		VEHICLE TRAVELLING		ON		AT		Est MPH		Posted Speed		EST. VEHICLE DAMAGE	
		N S E W		U.S. A1E 90				15		45		50.00	
		MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)						POLICY NUMBER		VEHICLE REMOVED BY:		1. Disabling 2. Functional 3. No Damage	
		U.S.A.A.						001388531C 71054		Owner		2	
		NAME OF VEHICLE OWNER (Check Box if Same As Driver)						CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
		X										3	
		NAME OF OWNER (Trailer or Towed Vehicle)						CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
		NAME OF MOTOR CARRIER (Commercial Vehicle Only)						CURRENT ADDRESS (Number and Street)		CITY, STATE AND ZIP CODE		US DOT or ICC MC IDENTIFICATION NUMBERS	
		NAME OF DRIVER (Take From Driver License) / PEDESTRIAN						CURRENT ADDRESS (Number and Street)		CITY, STATE AND ZIP CODE		DATE OF BIRTH	
		Richard Neal Smith						3537 Tallship Lane Pensacola, FL 32526		04-08-36			
		DRIVER LICENSE NUMBER		STATE		DL TYPE		REQ. END		ALCOHOL TEST TYPE		RESULTS	
		S530-754-36-128		FL		5		3		1 Blood 3 Urine 5 None 2 Breath 4 Refused		5	
		HAZARDOUS MATERIALS BEING TRANSPORTED		PLACARDED		IF YES, INDICATE NAME OR 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND.		WAS HAZARDOUS MATERIAL SPILLED?		RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE		DRIVER'S PHONE NO.	
		2		2				2		2		850-458-5622	
		DRIVER ACTION		YEAR		MAKE		TYPE		USE		VEH. LICENSE NUMBER	
		3		02		SATURN		01		01		CD2528	
		TRAILER OR TOWED VEHICLE INFORMATION										STATE	
												AL	
												VEHICLE IDENTIFICATION NUMBER	
												168ZH52862Z123648	
		VEHICLE TRAVELLING		ON		AT		Est MPH		Posted Speed		EST. VEHICLE DAMAGE	
		N S E W		U.S. A1E 90				0		45		250.00	
		MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)						POLICY NUMBER		VEHICLE REMOVED BY:		1. Disabling 2. Functional 3. No Damage	
		Aifa Mutual						A2142645		Owner		2	
		NAME OF VEHICLE OWNER (Check Box if Same As Driver)						CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
		X						P.O. Box 2612 Mobile, AL 36652				4	
		NAME OF OWNER (Trailer or Towed Vehicle)						CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
		NAME OF MOTOR CARRIER (Commercial Vehicle Only)						CURRENT ADDRESS (Number and Street)		CITY, STATE AND ZIP CODE		US DOT or ICC MC IDENTIFICATION NUMBERS	
		NAME OF DRIVER (Take From Driver License) / PEDESTRIAN						CURRENT ADDRESS (Number and Street)		CITY, STATE AND ZIP CODE		DATE OF BIRTH	
		Phillippi Sultter Lowe						109 S. Shipp Street Evergreen, AL 36401		02-06-51			
		DRIVER LICENSE NUMBER		STATE		DL TYPE		REQ. END		ALCOHOL TEST TYPE		RESULTS	
		2991683		AL		5		3		1 Blood 3 Urine 5 None 2 Breath 4 Refused		5	
		WAS HAZARDOUS MATERIAL BEING TRANSPORTED		PLACARDED		IF YES, INDICATE NAME OR FOUR DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND.		WAS HAZARDOUS MATERIAL SPILLED?		RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE		DRIVER'S PHONE NO.	
		2		2				2		2		251-578-4617	
		VEHICLE TYPE		VEHICLE USE		TRAILER TYPE		RESIDENCE (Driver / Ped.)		PHYSICAL DEFECTS		ALCOHOL / DRUG USE	
		01 Automobile		01 Private Transportation		01 Single Semi Trailer		1 County of Crash		1 No Defects Known		1 Not Drinking or Using Drugs	
		02 Van		02 Commercial Passengers		02 Tandem Semi Trailer		2 Elsewhere in State		2 Eyesight Defect		2 Alcohol - Under Influence	
		03 Light Truck / P.U. - 2 or 4 rear tires		03 Commercial Cargo		03 Tank Trailer		3 Non-Resident Out of State		3 Fatigue / Asleep		3 Drugs - Under Influence	
		04 Medium Truck - 4 rear tires		04 Public Transportation		04 Saddle Mount / Flatbed		4 Foreign 5 Unknown		4 Hearing Defect		4 Alcohol & Drugs - Under Influence	
		05 Heavy Truck - 2 or more rear axles		05 Public School Bus		05 Boat Trailer		DL TYPE		5 Illness		5 Had Been Drinking	
		06 Truck Tractor (Cab-Only)		06 Private School Bus		06 Utility Trailer		1 A 2 B 3 C		6 Seizure, Epilepsy, Blackout		5 Pending ALCOHOL / DRUG Test Results	
		07 Motor Home (RV)		07 Ambulance		07 House Trailer		4 D/ Chauffeur		7 Other Physical Defect			
		08 Bus (driver + seats for 9-15)		08 Law Enforcement		08 Pole Trailer		5 E/ Operator		INJURY SEVERITY		SAFETY EQUIPMENT IN USE	
		09 Bus (driver + seats for over 15)		09 Fire / Rescue		09 Towed Vehicle		6 E/ Oper.-Rest		1 None		1 Not in use	
		10 Bicycle		10 Military		10 Auto Transport		7 None		2 Possible		2 Seat Belt / Shoulder Harness	
		11 Motorcycle		11 Other Government		77 Other		REQUIRED ENDORSEMENTS		3 Non-Incapacitating		3 Child Restraint	
		12 Moped		12 Dump				1 Yes		4 Incapacitating		4 Air Bag - Deployed	
		13 All Terrain Vehicle		13 Concrete Mixer				2 No		5 Fatal (Within 30 Days)		5 Air Bag - Not Deployed	
		14 Train		14 Garbage or Refuse				3 No Endorsement Required		6 Non-Traffic Fatality		6 Safety Helmet	
		15 Low Speed Vehicle		15 Cargo Van								7 Eye Protection	
		77 Other		77 Other								EJECTED	
												1 No 2 Yes 3 Partial	